

**TRANSMITTAL  
FORM**

*(to be used for all correspondence after initial filing)*

Total No. of Pages in this Submission: 15

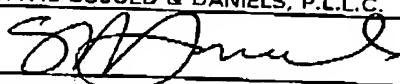
Application Number	10/575,316	
Confirmation Number	3636	
Filing Date	with an effective filing date of September 15, 2004.	
First Named Inventor	RECEIVED Josef BADER CENTRAL FAX CENTER	
Group Art Unit	3681 OCT 01 2008	
Examiner Name	Dirk WRIGHT	Fax: (571) 273-8300
Attorney Docket Number	ZAHFRI P861US	

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached - Check \$ <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (in Duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Stmt <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful) <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below):
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**REMARKS**

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual Name	Scott A. Daniels DAVIS BUJOLD & DANIELS, P.L.L.C.	Reg. No. 32,018 CUSTOMER NO. 020210
Signature		
Date	October 1, 2008	

**CERTIFICATE OF TRANSMISSION**

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on  
October 1, 2008.

Signature	
Date: October 1, 2008 (aag)	